

Amended filing for the corrected Jurat page



HEALTH QUARTERLY STATEMENT

AS OF JUNE 30, 2004
OF THE CONDITION AND AFFAIRS OF THE

CAPE HEALTH PLAN, INC.

NAIC Group Code	0000	0000	NAIC Company Code	95759	Employer's ID Number	38-2455176
	(Current Period)	(Prior Period)				
Organized under the Laws of	Michigan			State of Domicile or Port of Entry	Michigan	
Country of Domicile	United States of America					
Licensed as business type:	Life, Accident & Health [] Property/Casualty [] Dental Service Corporation [] Vision Service Corporation [] Other [] Health Maintenance Organization [X] Hospital, Medical & Dental Service or Indemnity [] Is HMO, Federally Qualified? Yes [] No [X]					
Date Incorporated	04/29/1982		Commenced Business	04/29/1982		
Statutory Home Office	26711 Northwestern Highway, Suite 300			Southfield, MI 48034		
	(Street and Number)			(City or Town, State and Zip Code)		
Main Administrative Office	26711 Northwestern Highway, Suite 300		Southfield, MI 48034	248-386-3000		
	(Street and Number)		(City or Town, State and Zip Code)	(Area Code) (Telephone Number)		
Mail Address	26711 Northwestern Highway, Suite 300			Southfield, MI 48034		
	(Street and Number or P.O. Box)			(City or Town, State and Zip Code)		
Primary Location of Books and Records	26711 Northwestern Highway, Suite 300		Southfield, MI 48034	248-386-3000-3003		
	(Street and Number)		(City or Town, State and Zip Code)	(Area Code) (Telephone Number)		
Internet Website Address	www.capehealth.com					
Statutory Statement Contact	Thomas A. Murar			248-386-3000-3003		
	(Name)			(Area Code) (Telephone Number) (Extension)		
	tmurar@capehealth.com			248-945-9149		
	(E-mail Address)			(FAX Number)		
Policyowner Relations Contact	26711 Northwestern Highway		Southfield, MI 48034	248-386-3003		
	(Street and Number)		(City or Town, State and Zip Code)	(Area Code) (Telephone Number) (Extension)		

OFFICERS

Name	Title	Name	Title
Susan Sarin	Chief Executive Officer	Nancy Wanchik	President & Chief Operating Officer
William Brodhead	Secretary	Ralph Woronoff	Treasurer

OTHER OFFICERS

Thomas Murar	Chief Financial Officer	Michele Lundberg	Corporate Compliance Officer
Delores Baker MD #	Medical Director	Rodger Prong	VP Network Services

DIRECTORS OR TRUSTEES

Nancy Wanchik	William Brodhead	Ralph Woronoff	Janis Coleman
Susan Sarin	Etrue Bryant	Shirley Lightsey	Thomas Murar
Shirley Salazar			

State of Michigan
County of Maccomb SS

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Nancy Wanchik President & Chief Operating Officer	Susan Sarin Chief Executive Officer	Thomas Murar Chief Financial Officer
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Subscribed and sworn to before me this
10 day of September, 2004

Linda Rusie, Notary Public
03/26/2007

a. Is this an original filing?	Yes [] No [X]
b. If no,	
1. State the amendment number	1
2. Date filed	09/10/2004
3. Number of pages attached	1